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Bib Data Sheet

CONFIRMATION NO. 6151

|   |   |                                       |   |  |
|---|---|---------------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>09/986,896  | <b>FILING DATE</b><br>11/13/2001<br><b>RULE</b>   | <b>CLASS</b><br><del>378</del><br>348 | <b>GROUP ART UNIT</b><br><del>2876</del><br>2615  | <b>ATTORNEY DOCKET NO.</b><br>216074US2TTCRD |
| <b>APPLICANTS</b><br>Mitsushi Ikeda, Kanagawa-ken, JAPAN;<br>Akira Kinno, Kanagawa-ken, JAPAN;<br>Toshiyuki Oka, Kanagawa-ken, JAPAN;   |   |                                       |   |  |
| <b>** CONTINUING DATA *****</b>   |   |                                       |   |  |
| <b>** FOREIGN APPLICATIONS *****</b><br>W JAPAN 2000-346565 11/14/2000  |   |                                       |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 01/16/2002</b>  |   |                                       |   |  |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <u>                    </u><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>JAPAN      | <b>SHEETS DRAWING</b><br>7  | <b>TOTAL CLAIMS</b><br>15                    |
| <b>INDEPENDENT CLAIMS</b><br>4  |   |                                       |   |  |
| <b>ADDRESS</b><br>22850   |   |                                       |   |  |
| <b>TITLE</b><br>X-ray imaging device  |   |                                       |   |  |
| <b>FILING FEE RECEIVED</b><br>1234  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                       | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |